

**Amendments to the Claims:**

This listing of claims will replace all prior versions, and listings, of claims in the application:

**Listing of Claims:**

Claims 1 to 20 (Cancelled).

21. (Currently Amended) An oral airway comprising:

an elongate tubular member having a distal end and a proximal end;

an enlarged mask opening portion at the distal end of the elongate tubular member for insertion into the mouth and pharynx of a patient with the proximal end of the elongate tubular member adapted to extend from the mouth of the patient, the mask opening portion having walls forming an enlarged proximal portion tapering to a smaller leading distal portion, the leading distal portion leading the mask opening portion as the mask opening portion is inserted into the mouth and pharynx of the patient, there being an opening separating the walls at the leading distal portion of the mask opening portion; and

a grate partially obstructing the opening to restrain any anatomical portions of the patient from entering the opening.

22. (Previously Presented) The oral airway of claim 21 wherein the grate is inclined within the opening such that, as a patient's epiglottis is engaged by the grate during insertion of the mask opening portion into the hypopharynx the epiglottis slides along the grate and into abutment with a wall at the proximal end of the mask opening portion.

23. (Cancelled)

24. (Previously Presented) The oral airway of claim 21 wherein the elongate tubular member is sufficiently rigid for insertion and sufficiently flexible to bend to anatomic contours of the mouth and pharynx during insertion into and upon being seated in a patient.

25. (Previously Presented) The oral airway of claim 21 wherein the mask opening portion is formed from a partially flexible material.

26. (Previously Presented) The oral airway of claim 21 wherein the elongate tubular member is sufficiently flexible to permit the elongate tubular member to be deformed as it is inserted into a patient's airway and sufficiently rigid to permit the elongate tubular member to be positioned in a patient and to provide an effective airway which is not readily blocked or obstructed during use.

27. (Previously Presented) The oral airway of claim 21 further comprising an inflatable cuff adjacent to the mask opening portion.

28. (Previously Presented) The oral airway of claim 21 further comprising a connection at the proximal end of the elongate tubular member to facilitate connection of the proximal end of the elongate tubular member to one of a respiratory device or an anesthesia device.

29. (Previously Presented) The oral airway of claim 21 further comprising an inflatable cuff radially surrounding the elongate tubular member proximate the proximal end of the mask opening portion.

30. (Currently Amended) An oral airway comprising:  
an elongate tubular member having a distal end and a proximal end;  
an enlarged mask opening portion at the distal end of the elongate tubular member for insertion into the mouth and pharynx of a patient with the proximal end of the elongate tubular member adapted to extend from the mouth of the patient, the mask opening portion having walls forming an enlarged proximal portion tapering to a smaller leading distal portion, the leading distal portion leading the mask opening portion as the mask opening portion is inserted into the mouth and pharynx of a patient, there being an opening separating the walls at the leading distal portion of the mask opening portion; and

a grate partially obstructing the opening to restrain any anatomical portions of the patient from entering the opening, the grate being inclined between the walls so that as a patient's epiglottis is engaged by the grate during insertion of the mask opening portion into the hypopharynx the epiglottis slides up the grate and into abutment with a wall of the mask opening portion, the grate being made of a flexible material that is rigid enough to slide the epiglottis into abutment with the wall of the mask opening portion as the mask opening portion is inserted into the hypopharynx, the flexible grate material defining apertures between bars of the grate.

31. (Cancelled)

32. (Previously Presented) The oral airway of claim 30 further comprising an inflatable cuff radially surrounding the elongate tubular member at the proximal end of the mask opening portion.

33. (Previously Presented) The oral airway of claim 30 further comprising a connection at the proximal end of the elongate tubular member to facilitate connection of the proximal end of the elongate tubular member to one of a respiratory device or an anesthesia device.

34. (Previously Presented) The oral airway of claim 30 further comprising an inflatable cuff around the elongate tubular member proximate the proximal end of the mask opening portion.

35. (Previously Presented) The oral airway of claim 30 wherein the elongate tubular member is sufficiently rigid for insertion and sufficiently flexible to bend to anatomic contours of the mouth and pharynx during insertion into and while seated within a patient.

36. (Previously Presented) The oral airway of claim 30 wherein the mask opening portion is formed from a partially flexible material.

37. (Previously Presented) The oral airway of claim 30 wherein the grate comprises a plurality of parallel bars extending within the opening.

38. (Currently Amended) A method of providing an oral airway to a patient comprising:

providing an elongate tubular member having a distal end and a proximal end with an enlarged mask opening portion at the distal end of the elongate tubular member for insertion into the mouth and pharynx of a patient with the proximal end of the elongate tubular member extending from the mouth of the patient, the mask opening portion having walls forming an enlarged proximal portion tapering to a smaller distal portion with a leading opening separating the walls at the distal end of the mask opening portion and a grate partially obstructing the leading opening to restrain any anatomical portions of the patient from entering the leading opening;

inserting the mask opening portion into the mouth of the patient;  
axially advancing the mask opening portion to slide the epiglottis up the grate; and  
seating the mask opening portion with the proximal portion of the mask opening portion abutting the laryngeal opening of the patient, a wall at the proximal end of the mask opening portion abutting the epiglottis and the grate adjacent to the glottis.

39. (Previously Presented) The method of claim 38 further comprising providing an inflatable cuff around the proximal end of the mask opening portion and, after seating the mask opening portion, inflating the inflatable cuff.

40. (Previously Presented) The method of claim 38 further comprising attaching one of an anesthesia device and an air providing device to the proximal end of the elongate tubular member.

41. (Previously Presented) The oral airway of claim 21, wherein the opening at the leading distal portion is inclined, a posterior portion of the distal portion extending beyond an anterior portion of the distal portion, the grate being configured so that, as a patient's epiglottis is engaged by the grate during insertion of the distal end into the hypopharynx, the epiglottis slides along the grate and into abutment with an anterior portion of the elongate tubular member.

42. (Previously Presented) The oral airway of claim 41, the mask opening portion having anterior and posterior portions with the opening being located at an distal end of the mask opening portion.

43. (Previously Presented) The oral airway of claim 41 wherein the grate is made of a flexible material that is rigid enough for the epiglottis to slide along prior to the epiglottis abutting the proximal end of the mask opening portion as the mask opening portion is inserted into the hypopharynx, the flexible grate material defining apertures between bars of the grate.

44. (Cancelled).